

Work Order ID 115764

April-04-14 10:21:12 AM

\*115764\*

Page 1

Item ID: D3755-041

Accept

\*N9000040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: Seat Cushion

Start Date: 4/04/14 Start Qty: 4.00

\*4\*

Cust Item ID:

Required Date: 4/04/14 Req'd Qty: 4.00

\*4\*

Customer:

Reference:

Approvals:

Process Plan:

*[Signature]*

Date: 14-04-7

Tooling:

Date:

QC:

Date:

SPC (Y/N):

Date:

Run Start \*NR1\*

Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

Draw Nbr

Revision Nbr

D3753

Rev D

D3755

Rev C

0.00

100

\*100\*

PURCHASING

0.00

Purchasing

Memo

Purchasing

Issue P/O: 23689

Manufacture D3753-1 cushion as per dwg Dwg D3753

Upholster as per Dwg D3755

Supplier: Aerotex

Material release note is required

*14-04-7*

0.00

110

Receive & Inspect for Damage & Mat'l Certs

\*110\*

Memo

0.00

Packaging

Packaging

*4/4/12 (4)*

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other    
--	--	---	--

# Work Order ID 115764

April-04-14 10:21:12 AM

**\*115764\***

Page 2

Item ID: D3755-041

Accept

**\*N900040100\***

Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Seat Cushion

Start Date: 4/04/14 Start Qty: 4.00

**\*4\***

Cust Item ID:

Required Date: 4/04/14 Req'd Qty: 4.00

**\*4\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120	QC6- Inspect dimensions to drawing	0.00				4			
<b>*120*</b>									
QC	Memo	0.00							
Quality Control									
130	Identify as per dwg & Stock Location	0.00				4x		14-4-23	
<b>*130*</b>									
Packaging	Memo	0.00							
Packaging									
140	QC21- Final Inspection - Work Order Release	0.00							
<b>*140*</b>									
QC	Memo	0.00							
Quality Control									

DAS  
28  
9-89

14/4/24

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other  _____ _____ _____
--	--	---	---

# Picklist Print

April-04-14 10:21:12 AM

Page 1

Work Order ID: 115764

**\*115764\***

Parent Item: D3755-041

**\*D3755-041\***

Parent Item Name: Seat Cushion

Start Date: 4/04/14

Required Date: 4/04/14

Start Qty: 4.00

Required Qty: 4.00

Comments: IPP: A08.11.17New issue EC verified by:DD IPP Rev:B  
10.04.13 as per ECN10-539 Verified by:EC IPP Rev:C 10.05.03  
remove velcro per comment (W/O 58260) DD verified :EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
---------------------------------	------------------------	---------------	-------------	---------------------	------------------	-----------------	--------------------	----------------	-------------	--------------	---------------	----------------	--------

D3755-041P

Purchased

No

110

Each

0.0000

1

4

**\*D3755-041P\***

Seat Cushion

**\*\***

*Rec'd 4/22/14 (4)*

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

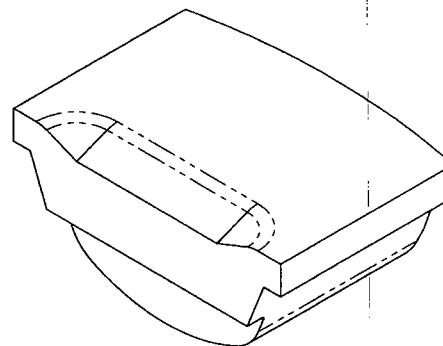
Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other  _____ _____ _____
--	--	---	---

ITEM	QTY -041	QTY -1	PART NUMBER	DESCRIPTION
1	X		D3755-041	CUSHION
2	1	X	D3755-1	COVER
3	1		D3753-1	SEAT FOAM
4		2	LOOP STRIP, 2"	3M SJ3418FR, 2" WIDE BEIGE OR D3800-1-200-100
5	A/R		LOOP STRIP, 1"	3M SJ3418FR, 1" WIDE BEIGE OR D3800-1-100-400
6		A/R	HOOK STRIP, 1"	APLIX 800, A800R0025H958-1, 1" WIDE BEIGE OR D3800-3-100-400
7		A/R	FABRIC	JACKSON GREYMIX
8		A/R	THREAD	BONDED POLYESTER, 14.2 lb BREAK STRENGTH, GREY COLOR
9	A/R		ADHESIVE	3M 1300 / 1300L RUBBER AND GASKET ADHESIVE OR SILAPRENE DC12906 SPRAY GRADE HPL CONTACT ADHESIVE
10		A/R	ZIPPER	PACANNA BRASS AUTOLOCK ZIPPER #5



**D3755-041 CUSHION**

115764  
R 14047

**RELEASED**  
2010-03-23

**NOTES:**

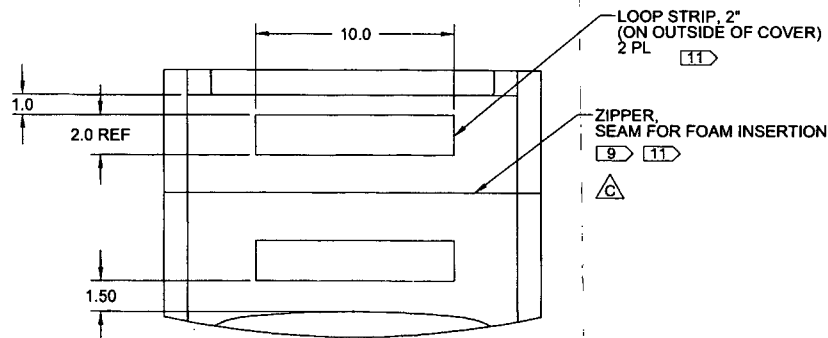
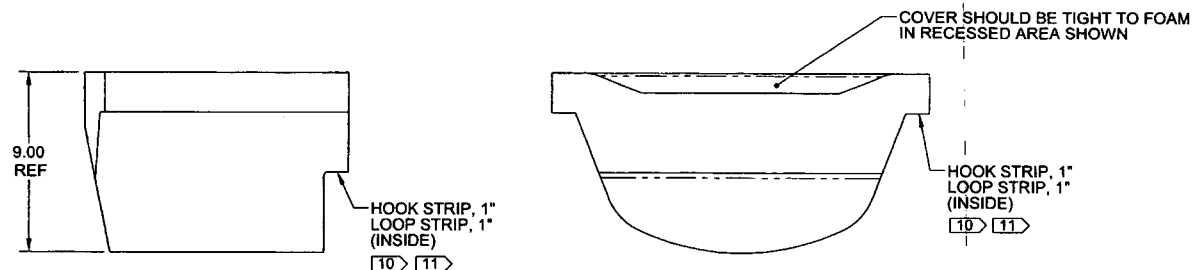
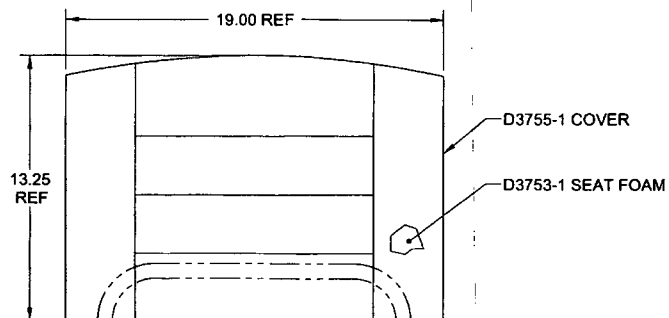
- 1) MATERIAL: N/A
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: NONE
- 6) IDENTIFICATION: IDENTIFY WITH DART P/N "D3755-041" USING LABEL
- 7) WEIGHT: 3.3 lbs APPROX
- 8) SEW D3755-1 COVER TO FIT D3753-1 FOAM
- 9) STITCH ZIPPER ALONG EDGE OF SEAM TO CLOSE COVER
- 10) TO PULL FABRIC AGAINST FOAM IN CONCAVE AREAS, STITCH HOOK STRIP (1") TO INSIDE OF COVER AS REQ'D.  
BOND LOOP STRIP (1") TO FOAM.
- 11) STITCHING: 4-6 STITCHES PER INCH, USE MIN 1/2" BACKSTITCH, NO LOOSE THREADS
- 12) CUSHION SHAPE / FORM / PATTERN TO CONFORM WITH TEMPLATE DT9419
- 13) ANY REQUIRED BONDING SHOULD BE DONE WITH SILAPRENE DC12906 SPRAY GRADE HPL CONTACT ADHESIVE  
OR 3M 1300/1300L RUBBER AND GASKET ADHESIVE

C	UPDATE TO VIEWS/NOTES DUE TO D3753 BEING RESHAPED & NEW MFR. FABRIC, HOOK, LOOP, ADHESIVE CHG (D5-1). ADD ZIPPER (D5-1, 54-2). REF PAR 09-030.	CP	10.02.02
B	COVER NOW CLOSED WITH SINGLE SEAM (ZN A8-1, B3-2), D3800-1-100-300 WAS D3800-1-100-800 (D8-1). D3800-3- 100-300 WAS D3800-3-100-800 (D8-1). ORIENTATION OF D3800-1-200-060 CHANGED (B3-2). ADD ITEM NUMBERS TO PART LIST (D8-1)	CP	08.10.21
A	NEW ISSUE	CP	08.09.09
REV.	DESCRIPTION	BY	DATE
DESIGN			
DRAWN			
CHECKED			
MFG. APPR.			
APPROVED			
DE APPR.			
DATE	10.02.02		

**DART AEROSPACE LTD**  
HAWKESBURY, ONTARIO, CANADA

DRAWING NO. **D3755** REV. C  
SHEET 1 OF 2  
TITLE **CUSHION** SCALE NTS

COPYRIGHT © 2008 BY DART AEROSPACE LTD  
THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS  
NOT TO BE USED FOR ANY PURPOSE OR COPIED OR DISSEMINATED TO ANY OTHER PERSON WITHOUT  
WRITTEN PERMISSION FROM DART AEROSPACE LTD.



**D3755-041 SEAT CUSHION**

**RELEASED**  
2010-03-23

DESIGN		<b>DART AEROSPACE LTD</b>	
DRAWN		HAWKESBURY, ONTARIO, CANADA	
CHECKED		DRAWING NO. <b>D3755</b>	REV. C
MFG. APPR.		SHEET 2 OF 2	
APPROVED		TITLE <b>CUSHION</b>	SCALE
DE APPR.		NTS	
DATE	10.02.02	<small>COPYRIGHT © 2008 BY DART AEROSPACE LTD. THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	





Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID PO23689

Purchase Order Date 4/7/2014

PO Print Date 4/7/2014

Page Number 1 of 2

**Order From :**

AEROTEX INTERIORS INC.  
2340 PEGASUS WAY NE  
UNIT 151  
CALGARY, AB T2E 8M5  
CA

VC-AER003

**Ship To :** DART AEROSPACE LTD  
1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

**FAXED**  
C 214/04/13

**Contact Name**

**Vendor Phone** 403 295 8770

**Ship To Contact**

**Ship To Phone**

**Ship Via:** FedEx PI collect

**Ship Acct:**

**Buyer**

Brigitte Golden

**Customer POID**

**Customer Tax #**

10127-2607

**Terms**

Net 30

**Currency**

CAD

**FOB**

FCA - (Free Carrier)

Line Nbr	Reference Vendor Part Number Line Comments Delivery Comments	Description/ Mfg ID	Req Date/ Taxable Promise Date	CD	Req Qty/ Unit of Measure	PO Unit Price	Extended Price
1	D3755-041P AS PER DWG D3753-RERV:D AND D3755-REV:C B115764	Seat Cushion	4/21/2014 22 Yes 4/21/2014		4.00 Each	\$425.00	\$1,700.00
						<b>Line Total:</b>	<b>\$1,700.00</b>
2	D3756-041P AS PER DWG D3754 REV:D AND D3756 REV: C B115861	Cushion	4/21/2014 22 Yes 4/21/2014		4.00 Each	\$425.00	\$1,700.00
						<b>Line Total:</b>	<b>\$1,700.00</b>

**Note:**

4/7/2014



151-2340 Pegasus Way NE  
Calgary, AB T2E 8M5  
PH: 403.295.8770 FX: 403.313.0793  
EM: info@aerotex.ca WS: www.aerotex.ca

# Packing Slip

Date Packing Slip#

4/17/2014 14-207

Ship: Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
CANADA

Customer Phone  
613.632.5200

Customer Fax  
613.632.1053

Ship Via  
Fedex P1

Courier Acct No.

Bill:

Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, Ontario K6A 1K7  
CANADA

Email: dbates@dartaero.com

Ship Date

P.O. No.

4/17/2014

PO23689

ID	Description	PN	ALT PN	Back Order	Shipped	Qty
DART	SEAT CUSHION	D3755-041P				4
DART	BACK CUSHION HST - on sales ON	D3756-041P				4

Thank you for doing business with Aerotex Interiors!

GST/HST No. 139110308

"your one stop shop for all your aircraft interior needs"



www.aerotex.ca

1. Organization issuing certificate. <b>Aerotex Interiors Inc.,          #151-2340 Pegasus Way NE          Calgary, AB T2E 8M5</b>	2. <div style="text-align: center; font-size: 2em; font-weight: bold;"> <b>CERTIFICATE OF CONFORMANCE</b> </div>	3. Work Order / Contract / Invoice  <b>14-207</b>
---	--	---

4. Customer Name/Address  <b>DART Aerospace LTD          1270 Aberdeen          Hawkesbury, ON K6A 1K7          CANADA</b>	5. Purchase Order  <b>PO23689</b>
--	---

6. Unit	7. Materials Used for Items	8. Specifications	9. Batch	10. Item	11. Part Number	12. Quantity	13. Status
1	1" Velcro Loop –Beige	D3800-1-100-700	6604-1	SEAT CUSHION	<b>D3755-041P</b>	4	NEW
2	1" Velcro Hook – Beige	D3800-3-100-700	6604-2				
3	2" Velcro Loop – Beige	D3800-1-200-600	6261-3				
4	Fabric	Jackson GreyMix	5238				
5	Thread – Bonded Polyester Grey	14.2In Break strength	6566-3				
6	Adhesive	3M 1300/1300L Adhesive	6555				
7	Zipper	PaCanna Brass Autolock Zipper #5	N/A				
8	Foam	UC65	6307				

14. Remarks  I certify that the materials supplied for the Purchase/Repair Order listed above conform to Aerotex Interiors's material/process specification and are in all respects in conformance with the contract requirements. I further certify that items have been fabricated to established specification to confirm with DWG. NO. D3755  Burn test requirements
--

15. Signature 		16. Title  <div style="text-align: center; font-size: 1.5em; font-weight: bold;"> <b>QC Manager</b> </div>
17. Name  <div style="text-align: center; font-weight: bold;"> <b>Jack Poovong</b> </div>	<div style="text-align: center; font-size: 1.5em; font-weight: bold;"> <b>April 17<sup>th</sup>, 2014</b> </div>	